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ON THE  
MEDICAL INJUNCTION  
OF  
STIMULANTS,  
IN  
DISEASE AND IN HEALTH.

BY  
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TO  
SIR GEORGE BURROWS, BART.,  
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CONSULTING PHYSICIAN TO ST. BARTHOLOMEW'S HOSPITAL; PHYSICIAN  
IN ORDINARY TO THE QUEEN; LATE PRESIDENT OF THE  
ROYAL COLLEGE OF PHYSICIANS,

THIS ADDRESS IS INSCRIBED (BY PERMISSION,  
AND WITH HIS  
CORDIAL CONCURRENCE IN THE PRINCIPLES ADVOCATED),  
WITH FEELINGS OF ADMIRATION AND AFFECTION  
BY HIS FORMER PUPIL,  
THE WRITER.

*Grafton Street, Piccadilly.*

*Nov. 1877.*



## ON THE MEDICAL INJUNCTION OF STIMULANTS IN DISEASE AND IN HEALTH.

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I AM not unmindful that I open up in this brief communication a very large subject ; but it seems to me that I can fairly well embody what I have to remark within the compass of a short paper, provided that I avoid arguments upon general principles, and make but brief deductions from particular instances. There can be no doubt that the public is much stirred and interested at the present time upon the subject of stimulants. It has come home to the minds of a large number of true-hearted and patriotic Englishmen that the reproach cast upon this country for its notorious drunkenness is utterly grievous, and calls on all hands for the best efforts to remove it. We find, therefore, that such efforts have taken form in various organisations to promote temperance. It appears to me that all action in this matter should be based upon the soundest principles ; and, as a problem of this nature manifestly lies within the sphere of medical men to solve, it is clear that the members of the medical profession should exhibit such unanimity upon the subject as becomes those who have received the fullest measure of physiological training in the community. And, indeed, the question of our national intemperance practically comes, in the meantime, to be dealt with by the clergy and the doctors. When the medical profession presents an united front, or, at all events, a stronger body in line than it actually does to-day, arrayed against this evil, it will be in a position to lay down principles which should guide the clergy in their efforts, and the time will then have arrived when the members of these two professions can together lay such a case at the doors of our legislators as they can neither gainsay nor resist.

I apprehend that a vast deal of energy is lost in this cause, and no little harm done to the legitimate influence of medical men, because such immense differences of opinion prevail amongst our members on the sub-

ject of stimulants. As one who signed the famous medical declaration respecting alcohol some years ago, my own position in regard to this question is fixed. I have never wavered in my opinion, and I think I see clearly the aspect in which this subject should be viewed by all thoughtful and observant practitioners of the medical art. But what do we find as the expressions of opinion of men from within our ranks? We have in London a Temperance Hospital. If a temperance hospital be a proper and superexcellent institution, then all the hospitals in the world are worked on an erroneous principle in this respect. We find one of our most original members, a man of unquestioned ability, and fertile in ingenuity beyond his fellows—Dr. Richardson—actively engaged in propagating teetotalism as the outcome of elaborate physiological experiment. We find the most skilful lithotritist of the day enjoining the same practice of abstention. On the other side, we find, if not a large number of practitioners, yet very many, who, if not in a position to teach, certainly enforce by their injunctions, the principle of the value of full stimulation both in health and disease. We find further, and happily, that a clear majority enjoins what may be termed a legitimate and sensible course in this matter.

But, when we review this varied expression of opinions, can we allow that it is satisfactory or in any way creditable to our profession? If such gulfs exist within our own ranks, what opinion is to be formed by the laity who, in these days, are wise enough to think for themselves on most subjects? Here we have a vast body of men specially trained to observe, brought into the closest contact with their fellow-men under every conceivable variety of circumstances, differing, be it noted, about *facts*. Now, as my late revered teacher Professor Hughes Bennett used to say, it must always be discreditable for medical men to disagree about *facts*, though large latitude may be allowed for difference about *theories*. If this be so—and I accept this dictum—then there is no middle course for us to pursue. Stimulants, therefore, are *all right if they be rightly used*, or they are *all wrong if they be used at all or in any degree*. It behoves every one of us to have a clear understanding in this matter, and to frame our conduct upon well-ascertained and incontrovertible principles; for I suppose no one here will stand up to defend the exploded theories as to change of type either in humanity or the diseases of that humanity. We are all old enough to have witnessed some wave, or it may be waves, of fashion in therapeutic measures. Some may recall the bloodletting days,

others the days of distinct stimulant treatment; some have seen mercury abused, and some have perchance seen attempts made to treat disease without this drug. But what do we all agree to say and to affirm to-day in respect of such reminiscences? Do we not say that all these fashions in treatment successively represented unstable struggles towards truth; that, as by a Nemesis, one extreme was followed by another, and that assuredly all these errors of opinion have been so resolved that we have now a rational basis of attained medical truth?

If, then, we cast our eyes over the prevalent varied opinions upon this subject of stimulants, we see several waves upon the horizon; and, when we confront such an outlook, I think we are not likely to be wrong if we believe that these perturbations, like others that have come before, will subside and leave us with some settled opinions. But the whole question must be taken up; and its claims for our best attention are very strong, especially at this time. I believe, then, firmly that a wave of fashion in physic very rarely, if ever, represents a wholesome thing in itself; and our duty is to resist being carried away upon such waves by holding on to the ever sure method of constant clinical watchfulness. The settlement of this vexed question comes, I apprehend, by honest clinical work in so far as the sick are concerned.

On the topic of stimulants for healthy people I shall express myself presently; but I would remark in this place that it seems to me inconceivable, if not absurd, that a solution of such questions could ever be attained by the best researches made in laboratories upon any of the lower animals. Arguments deduced from such sources, however, weigh very heavily with the laity; and it is easily intelligible that appeals should be made to such researches by zealous but non-scientific labourers in the great temperance cause. I am not here to decry the splendid work done in the laboratories of this or other countries, nor to discourage any earnest seekers after new truths in physiology — far from it; but surely the great laws affecting the physical wellbeing of our humanity are best to be learned by the study of that special humanity itself and of all that influences it. There must ever be a great gulf fixed between all that pertains to man and all that affects even the next inferior order of beings. We cannot in all respects apply the physiology of the lower animals to problems which man's body *alone* furnishes for us daily. The chief study of the medical mind should be *man*.

Not to digress further in this direction, I pass on to state briefly what I hold and see to be the true and legitimate position which the

thoughtful in the medical ranks assume in respect to the employment of stimulants in disease. I shall not find many to differ from me in the opinion that the whole course of illness, in most cases of the continued fevers, can be conducted in young persons without stimulants, provided no important complications or undue asthenia are present. There can be no question, I believe, that these do best on milk-diet for the most part, and, as a rule, require no stimulants. During convalescence, the addition of three or four ounces of wine to the diet for an adult seems certainly sometimes beneficial. In elderly persons, and in those who have been in the habit of using stimulants freely, it is frequently *necessary* to employ spirit and wine, sometimes in large amount. The same rules hold good for pneumonia; not so for cases of pleurisy, with or without effusion. In the exanthemata, cases void of special complications betokening either malignancy or asthenia require no stimulants, as a rule. But, given the typhoid or putrid state supervening in any such cases, resort must be had to alcohol. The well-trained clinical finger and ear will recognise the circulatory conditions which indicate it. Time would fail me merely to enumerate either the separate diseases or the special indications in and for which stimulation is deemed advisable, and only deemed so because of its distinct beneficial effect; I shall, therefore, only refer to some classes of diseases to illustrate what I mean by the legitimate employment of stimulants. In the varieties of Bright's disease, it is plain that alcohol is not wanted, either as a nutrient or a stimulant. In most, if not all, hepatic affections, in gout and gouty disorders, in affections of the urinary tracts and bladder, we find but rarely a place for alcohol. In rheumatic fever, no stimulant is called for, unless in those long-standing cases where the heart becomes weak, and the patient is exhausted by alkaline sweats, where truly alcohol is the best drug we know of; and especially do we not want stimulants in acute rheumatic pericarditis, save where there is perhaps danger of fatal syncope from large effusion. During convalescence, however, stimulants may be needed, if much myocarditis have occurred. In the majority of cases of valvular cardiac disease, whether it be mitral or aortic, or both, there are often clear indications for wine or moderate stimulation. In phthisis, the same rule holds good; and in all cases of chronic suppuration, the value of wine and malt liquor can hardly be questioned. Perhaps, no cases admit of more free stimulation than those of bronchitis, especially in old persons. The power of alcohol is also very great in several infantile affections, in bronchitis particularly, and as a fattening agent in



marasmus. In the large class of nervous disease, much discrimination is needed. Great care must be exercised in cases of hysteria. Choreic patients are often benefited by wine, but most cases of chronic nervous disease are perhaps best treated with little or none.

Now, what is the outcome of this rapid and most imperfect sketch? It is surely this: that there is *no routine* in the matter of employing stimulants. Legitimate injunction of malt liquor, wine, or alcohol is, therefore, placed in exactly the same category with that of any medicinal drug or therapeutic agent we employ. Every case is judged upon its own merits. There is a reason for the giving, or for the withholding, for the particular stimulant *prescribed*, and in each instance the cardinal clinical rule is to be observed, viz., to ascertain, so far as possible, what is the ailment, and what is the phase and import of it, to the particular individual before us. This, then, I maintain, is the position into which we, as intelligent and rational practitioners, relegate the question as to the use of stimulants in disease. We put alcohol, with its congeners, into our therapeutic armamentarium; it is to hand when wanted, just as are quinine, calomel, the lancet, or the cupping-glass. We cannot do without it, or any of these things, but we employ them or not, as our bedside knowledge indicates.

To turn now to the second part of this communication, which shall be brief, What is the medical injunction respecting stimulants for the healthy? We have hitherto spoken of these agents as medicines, and so they are, be it observed, *to the sick*. But, is alcohol or wine food? Some physiologists tell us no. I do not believe them. Malt liquors, at all events, are simply thin soups with a modicum of alcohol, and I am fully satisfied of the nutrient power of wine and alcohol alone, under some conditions, or more especially in conjunction with other pabula. That those things are *necessary* to healthy and well-fed people leading what may be called normal lives, I do not believe. There is plain evidence to the contrary. The majority of healthy people leading wholesome lives *can* do without stimulants. To such persons, a *moderate* use of wine or malt liquor is, therefore, a luxury, but not *necessarily* a pernicious one in itself. But, I ask, how many people are there in the world of sound health persistently leading normal lives? Are we prepared to say that a little good beer is not a very valuable addition to the often scant fare and coarse food of multitudes of hard-working people in the lower orders, or that it may not fairly be taken *in moderation* to counteract, as it will, the many sources of depression to which such people are inevitably exposed in this country? I think

not. And, if I am told that persons of this class cannot get good beer, then I maintain that the legislature is in fault for permitting unwholesome liquors to be sold to any portion of the community. Medical men may, I believe, fairly tell the healthy and robust, the well-fed and well-housed, to forego the use of stimulants if they find that they fully maintain their health without them.

Knowing full well the injurious effects of even slight excess in strong drink, it should be borne in mind that total abstainers are generally large eaters, and thus the digestive and excretory organs may have as much work to do for the abstainer as for the slightly immoderate drinker. Hence the ultimate textural effects, if any, may not be very dissimilar in the two cases. I think it is proved that the addition of a little alcoholic food to a meal secures a more moderate ingestion of solids, and where it agrees, which it does not always, promotes a more satisfactory digestion of them. We have to recognise further that a large number of persons are distinctly better without alcoholic drinks in any form or quantity. They suffer from a series of anomalous ailments, chiefly dyspepsia and insomnia, and will never have their proper health so long as they take stimulants of any kind. It would be well often to try the omission of stimulants in such cases, and to watch the result.

We cannot fail to observe that persons of all degrees of intelligence and culture, who are never intemperate, begin at a certain time of life to limit themselves, as they say, to a daily allowance of alcohol. They drink so much beer or wine seven days a-week, be they busy, be they idle, be they out of doors, or be they immured. This is manifestly wrong, and such habits need correction from intelligent medical sources. There can, I hold, be no routine allowance of alcoholic food even for the healthy. There must be a relation between the nervous, muscular, and respiratory wear and tear and the consumption of this paratriptic food. More may be needed or instinctively called for to-day, and less to-morrow ; on some days none at all perhaps.

It comes to this, then, that *the rational individual must honestly and conscientiously find out for himself what the special needs of his system are*; and where a right-minded Christian individual is in earnest on such a matter, and has proper control over his appetite, he is not likely to go far wrong in the matter of stimulants.

If we have to deal with the subjects of drinking insanity, with the nervous classes of drunkards, with persons who are careless and self-indulgent, or who by their lives and callings are much in the way of

drink, our duty as medical men is surely very plain. Let us urge teetotalism in all such cases. And here comes in a difficult part of the medical practitioner's duty. It is certain that by a too pliant demeanour we may retain the confidence of tippling patients, and by plain speaking we may sometimes lose that confidence. Our duty is still clear. The honour of our calling is at stake, and we are constrained to utter our suspicions, to warn the immoderate drinker, and to unmask the secret tippler. I may safely say for myself that I cannot recollect one instance out of very many where, by such conduct, I have not only not lost the confidence of such patients, but have not unfrequently gained more than I held before. The slyness and the accompanying moral obliquity of these unhappy persons stand abashed and crushed before a plain and unvarnished charge of the subtle entangling habit. We must yield neither to the gross nor to the astute drinker, otherwise we stultify ourselves, encourage immorality, and bring disgrace and contumely upon our profession. It were well if, as a body, we were well agreed upon certain principles to recommend to those who seek our advice in the matter of stimulants, and it were a better thing still if those of the public who are in doubt on this matter would both ask and act upon our precepts thus founded.

I presume we are mostly well agreed that stimulants should, as a rule, be always taken at meal-times, and only then ; and that no person in health should take them till the afternoon at the earliest, supposing conformity to ordinary English meal-times is observed. Herein lies the elementary pathway, I conceive, to reform of our national intemperance. I not only presume, but I am confident, that as a body our profession is unanimous in condemning the modern American habit of taking odd glasses of stimulants at all hours, and laments the grievous multiplication of the means of gratifying this mischievous custom ; for truly the conduct of masses of young business-men, in our cities and large towns, in this respect is becoming disgraceful, and the practice is fast gaining in other circles and communities. Our countrymen of these classes have no excuse for this, for they are well fed, and have liquors with their meals in addition to their hourly drams ; while Americans, who are notoriously the worst dietitians in the civilised world, are water-drinkers at meal-times.

Again, we are all agreed that children and healthy young persons are best without stimulants, and that the hardiest of our lads need nothing stronger than very small beer with their dinner, even if they really need that. I think we require to exercise great care in our advice on this

matter to the descendants of drunkards, and of the subjects of the various neuroses, having regard to the inherited instability of their various orectic centres.

There exists difference of opinion as to the effects of sudden and complete cutting off of stimulants in the persons of hard drinkers and the subjects of acute debauch. Such ought not to exist. There is ample evidence that no serious results will follow such a course. I should consider it bad practice now-a-days to find a patient with delirium tremens treated with any measure of stimulant. It can be, and ought to be, suspended at once ; for it is proved to be unnecessary, unless some special complication calls for it. The practice of large hospitals and of our prisons fully confirms me in this opinion.

In conclusion, let me say a few words respecting the attitude of our profession towards the movement for promoting teetotalism. After all I have just uttered, you cannot suppose that this mission can have my approval. I believe that a mission against the drinking habits of all classes and communities conducted upon principles of total abstinence is a hopeless one to embark upon. It is simply to fight the air. Little can, in the nature of things, come of it. A crusade against our grievously prevalent intemperance, an intemperance in strong drinks more or less great in all classes, an intemperance amounting often to gluttony in respect of unnecessary delicacies amongst the wealthy classes, conducted upon principles of true moderation and sobriety, is a very different matter. In the one case, we have no scientific basis to work from, and we cannot stultify ourselves as medical men by countenancing so vain a mission. As well might we enjoin total abstention from any wholesome and innocent practice. As I have already remarked, I recognise whole classes of cases in which such a practice is proper and advisable. Teetotalism is, therefore, a therapeutic measure for our injunction when necessary or advisable. If the examples set by good people would of themselves avail to rescue the mass of drunkards, England would be amongst the least drunken countries to-day.

In the other case, we can all, as enlightened, thoughtful, and scientific men, combine with vast power to check both intemperance and gluttony, and join hands with our clerical brethren in a mission of reclaiming and warning our erring fellow-countrymen, and, alas, countrywomen too, at once worthy of our art, our patriotism, and our Christianity. It behoves us, as calm-thinking and scientific men, to be very careful how we countenance this wavelet of opinion upon teetotalism ; for so surely as we be carried away by any fleeting clamour, and fall in with any



cant temporarily prevalent, so surely shall we, sooner or later, see the error we have made, and come to repent of the yoke under which we have put our necks. I flatly refuse to believe that the broad stream of common sense and legitimate freedom in this, or any other like matter, has flowed for centuries in a wrong channel, and that we alone in our day are called upon not only to divert, but to dam it up for all future time.

While I thus venture to express what I believe to be the calm and matured opinion, as well as the rational standpoint, of the profession, I am not here to decry the noble examples of total abstention from strong drinks set by the clergy and others in conspicuous positions. Such men and women may well go forth, if their health permit them, to special combat with the vice of drunkenness, fully equipped. We, as a body, are at all events unable to resist the evidence they bear to the effect that their principles *alone*, in many cases, enable them to reclaim drunkards, and achieve results that would otherwise be impossible.

Since writing this short paper, I have chanced to read an epitome of the medical evidence given before the House of Lords' Committee on Intemperance. In my humble opinion, that evidence was eminently satisfactory. But I feel constrained to offer objection to some of Sir William Gull's statements. "In conditions of fatigue," Sir William is reported to have remarked, "people might very well drink water, or take food, and would be very much better without the alcohol." To me, this seems a venturesome, if not an unfounded, opinion. The statement is, in any case, too bald. It is certainly not in accord with carefully acquired experience in many instances of fatigued conditions. For myself, I may assert that I am fully satisfied of the power of stimulants in states of bodily, cerebral, and cardiac exhaustion. I would not for one moment be understood to recommend recourse to alcoholic stimulus in all cases of exhaustion; but I clearly recognise conditions—not of very common occurrence, certainly—of systemic fatigue which "water" will not allay, and in which the very idea of "food", even to a naturally wholesome and strictly temperate man, at such a moment, is simply loathsome. For such an one to take a glass of wine is to be so far restored as within a short time to be enabled to eat such a meal as without the preliminary stimulant he could certainly not have faced. That is not an opinion; it is a fact. Another statement of Sir William Gull was to the effect that when "he personally was fatigued, he ate the raisins instead of taking the wine".

This is certainly epigrammatical, if not paradoxical, but I venture to deprecate such a method in giving scientific evidence; for the authority of the expert is sure to be requoted, and his opinions will be carried on to various platforms and possibly receive even a literal interpretation, which, in this particular instance, would, of course, be absurd.\*

I trust that the remarks which I have had the honour to make at this meeting may be received in the spirit in which they have been offered. As I have already remarked, society is a good deal disturbed and occupied just now with the questions I have touched upon. Much not unnatural warmth and indignation have been imported into discussions upon them, some only so recently as last week at the Croydon Church Congress. Those who hold fast to the old lines of freedom and moderation are held up to rebuke and disdain, and are even reckoned as enemies to the truths and progress of Christianity. There is, indeed, cause for indignation, and a stirring call to combat the bestial excesses and stupid intemperance which are rife around us; but, if this righteous fervour be laid in proper channels, it will, in my opinion, meet its true enemies in the intricate social habits of the present day, in the sadly increased facilities for drinking which spread around us, in ignorance, and in the merely *nominal* Christian lives which are led by many of our countrymen. These are the roots of this upas tree, and to these must the axe be laid.

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\* Since I read this paper, I have, to my great amusement, actually heard the above gravely quoted at a meeting of the Church of England Temperance Society.



